

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000109730

Entity Name: SHELLPOINT & BALM, LLC

Current Principal Place of Business:

95 SEAMAN AVENUE
ROCKVILLE CENTRE, NY 11570

Current Mailing Address:

95 SEAMAN AVENUE
ROCKVILLE CENTRE, NY 11570

FEI Number: 20-3786160

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLODIG, GREGORY J
100 W. CYPRESS CREEK ROAD STE 700
FORT LAUDERDALE, FL 33309 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name EZRA, JOEL S
Address 95 SEAMAN AVENUE
City-State-Zip: ROCKVILLE CENTRE NY 11570

Title MGR
Name HOWE, DAVID
Address 31 HICKORY HILL ROAD
City-State-Zip: TAPPAN NY 10983

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOEL S EZRA

MGR

01/23/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date